

B 25C (Official Form 25C) (12/08)

# UNITED STATES BANKRUPTCY COURT

Southern District of New York

In re BENJAMIN JACK DOUEK,  
Debtor

Case No. 17-22974 (RDD)

Small Business Case under Chapter 11

## SMALL BUSINESS MONTHLY OPERATING REPORT

Month: March 2018

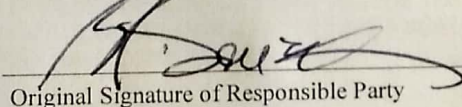
Date filed: 04/30/2018

Line of Business: Management Consultant

NAISC Code: \_\_\_\_\_

IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THE FOLLOWING SMALL BUSINESS MONTHLY OPERATING REPORT AND THE ACCOMPANYING ATTACHMENTS AND, TO THE BEST OF MY KNOWLEDGE, THESE DOCUMENTS ARE TRUE, CORRECT AND COMPLETE.

RESPONSIBLE PARTY:

  
Original Signature of Responsible Party

Benjamin J. Douek  
Printed Name of Responsible Party

**Questionnaire:** (All questions to be answered on behalf of the debtor.)

	Yes	No
1. IS THE BUSINESS STILL OPERATING?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. HAVE YOU PAID ALL YOUR BILLS ON TIME THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. DID YOU PAY YOUR EMPLOYEES ON TIME?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. HAVE YOU DEPOSITED ALL THE RECEIPTS FOR YOUR BUSINESS INTO THE DIP ACCOUNT THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. HAVE YOU FILED ALL OF YOUR TAX RETURNS AND PAID ALL OF YOUR TAXES THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. HAVE YOU TIMELY FILED ALL OTHER REQUIRED GOVERNMENT FILINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. HAVE YOU PAID ALL OF YOUR INSURANCE PREMIUMS THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. DO YOU PLAN TO CONTINUE TO OPERATE THE BUSINESS NEXT MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. ARE YOU CURRENT ON YOUR QUARTERLY FEE PAYMENT TO THE U.S. TRUSTEE?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. HAVE YOU PAID ANYTHING TO YOUR ATTORNEY OR OTHER PROFESSIONALS THIS MONTH?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. DID YOU HAVE ANY UNUSUAL OR SIGNIFICANT UNANTICIPATED EXPENSES THIS MONTH? <u>Elevator and dishwasher repairs \$450</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. HAS THE BUSINESS SOLD ANY GOODS OR PROVIDED SERVICES OR TRANSFERRED ANY ASSETS TO ANY BUSINESS RELATED TO THE DIP IN ANY WAY?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. DO YOU HAVE ANY BANK ACCOUNTS OPEN OTHER THAN THE DIP ACCOUNT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

B 25C (Official Form 25C) (12/08)

14. HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH? ☐ ☒
15. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH? ☐ ☒
16. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH? ☐ ☒
17. HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH? ☐ ☒
18. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY? ☐ ☒

### TAXES

DO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX OBLIGATIONS? ☐ ☒

IF YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.

(Exhibit A)

### INCOME

PLEASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST SHOULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

**TOTAL INCOME** \$ 3,556.93

### SUMMARY OF CASH ON HAND

Cash on Hand at Start of Month \$ 1,819.66

Cash on Hand at End of Month \$ 574.90

PLEASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU **TOTAL** \$ 3,000.00

(Exhibit B)

### EXPENSES

PLEASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK ACCOUNTS THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE PURPOSE AND THE AMOUNT. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

**TOTAL EXPENSES** \$ 4,801.69

(Exhibit C)

### CASH PROFIT

INCOME FOR THE MONTH (TOTAL FROM EXHIBIT B) \$ 3,556.93

EXPENSES FOR THE MONTH (TOTAL FROM EXHIBIT C) \$ 4,801.69

(Subtract Line C from Line B)

**CASH PROFIT FOR THE MONTH** \$ -1,244.76



B 25C (Official Form 25C) (12/08)

### UNPAID BILLS

PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE. *(THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)*

TOTAL PAYABLES \$ 0.00

*(Exhibit D)*

### MONEY OWED TO YOU

PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY, HOW MUCH IS OWED AND WHEN IS PAYMENT DUE. *(THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)*

TOTAL RECEIVABLES \$ 30,000.00

*(Exhibit E)*

### BANKING INFORMATION

PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT OR HAD DURING THE PERIOD COVERED BY THIS REPORT.

*(Exhibit F)*

### EMPLOYEES

NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED?	1
NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT?	1

### PROFESSIONAL FEES

#### *BANKRUPTCY RELATED:*

PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ 0.00

TOTAL PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ 0.00

#### *NON-BANKRUPTCY RELATED:*

PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ 0.00

TOTAL PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ 0.00

B 25C (Official Form 25C) (12/08)

### PROJECTIONS

COMPARE YOUR ACTUAL INCOME AND EXPENSES TO THE PROJECTIONS FOR THE FIRST 180 DAYS OF YOUR CASE PROVIDED AT THE INITIAL DEBTOR INTERVIEW.

	Projected	Actual	Difference
INCOME	\$ _____	\$ _____	\$ _____
EXPENSES	\$ _____	\$ _____	\$ _____
CASH PROFIT	\$ _____	\$ _____	\$ _____

TOTAL PROJECTED INCOME FOR THE NEXT MONTH:	\$ 8,500.00
TOTAL PROJECTED EXPENSES FOR THE NEXT MONTH:	\$ 4,500.00
TOTAL PROJECTED CASH PROFIT FOR THE NEXT MONTH:	\$ 4,000.00

### ADDITIONAL INFORMATION

PLEASE ATTACH ALL FINANCIAL REPORTS INCLUDING AN INCOME STATEMENT AND BALANCE SHEET WHICH YOU PREPARE INTERNALLY.

B 25C (Official Form 25C) (12/08)

# UNITED STATES BANKRUPTCY COURT

\_\_\_\_\_ District of \_\_\_\_\_

In re \_\_\_\_\_,

*Debtor*

Case No. \_\_\_\_\_

Small Business Case under Chapter 11

## SMALL BUSINESS MONTHLY OPERATING REPORT

Month: \_\_\_\_\_

Date filed: \_\_\_\_\_

Line of Business: \_\_\_\_\_

NAISC Code: \_\_\_\_\_

IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THE FOLLOWING SMALL BUSINESS MONTHLY OPERATING REPORT AND THE ACCOMPANYing ATTACHMENTS AND, TO THE BEST OF MY KNOWLEDGE, THESE DOCUMENTS ARE TRUE, CORRECT AND COMPLETE.

RESPONSIBLE PARTY:

\_\_\_\_\_  
Original Signature of Responsible Party

\_\_\_\_\_  
Printed Name of Responsible Party

**Questionnaire:** *(All questions to be answered on behalf of the debtor.)*

	Yes	No
1. IS THE BUSINESS STILL OPERATING?	<input type="checkbox"/>	<input type="checkbox"/>
2. HAVE YOU PAID ALL YOUR BILLS ON TIME THIS MONTH?	<input type="checkbox"/>	<input type="checkbox"/>
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4. HAVE YOU DEPOSITED ALL THE RECEIPTS FOR YOUR BUSINESS INTO THE DIP ACCOUNT THIS MONTH?	<input type="checkbox"/>	<input type="checkbox"/>
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9. ARE YOU CURRENT ON YOUR QUARTERLY FEE PAYMENT TO THE U.S. TRUSTEE?	<input type="checkbox"/>	<input type="checkbox"/>
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- |   |                          |                          |
|---|--------------------------|--------------------------|
| 14. HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH?     | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH?      | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH?               | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH?    | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY? | <input type="checkbox"/> | <input type="checkbox"/> |

### TAXES

DO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX OBLIGATIONS?	<input type="checkbox"/>	<input type="checkbox"/>
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IF YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.

*(Exhibit A)*

### INCOME

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**TOTAL INCOME** \$ \_\_\_\_\_

### SUMMARY OF CASH ON HAND

Cash on Hand at Start of Month \$ \_\_\_\_\_

Cash on Hand at End of Month \$ \_\_\_\_\_

PLEASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU **TOTAL** \$ \_\_\_\_\_

*(Exhibit B)*

### EXPENSES

PLEASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK ACCOUNTS THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE PURPOSE AND THE AMOUNT. *(THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)*

**TOTAL EXPENSES** \$ \_\_\_\_\_

*(Exhibit C)*

### CASH PROFIT

INCOME FOR THE MONTH *(TOTAL FROM EXHIBIT B)* \$ \_\_\_\_\_

EXPENSES FOR THE MONTH *(TOTAL FROM EXHIBIT C)* \$ \_\_\_\_\_

*(Subtract Line C from Line B)*

**CASH PROFIT FOR THE MONTH** \$ \_\_\_\_\_

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**TOTAL PAYABLES** \$ \_\_\_\_\_

*(Exhibit D)*

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**TOTAL RECEIVABLES** \$ \_\_\_\_\_

*(Exhibit E)*

### BANKING INFORMATION

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*(Exhibit F)*

### EMPLOYEES

NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED? \_\_\_\_\_

NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT? \_\_\_\_\_

### PROFESSIONAL FEES

#### *BANKRUPTCY RELATED:*

PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ \_\_\_\_\_

TOTAL PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ \_\_\_\_\_

#### *NON-BANKRUPTCY RELATED:*

PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ \_\_\_\_\_

TOTAL PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ \_\_\_\_\_

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### PROJECTIONS

COMPARE YOUR ACTUAL INCOME AND EXPENSES TO THE PROJECTIONS FOR THE FIRST 180 DAYS OF YOUR CASE PROVIDED AT THE INITIAL DEBTOR INTERVIEW.

	Projected	Actual	Difference
INCOME	\$ _____	\$ _____	\$ _____
EXPENSES	\$ _____	\$ _____	\$ _____
CASH PROFIT	\$ _____	\$ _____	\$ _____

TOTAL PROJECTED INCOME FOR THE NEXT MONTH: \$ \_\_\_\_\_

TOTAL PROJECTED EXPENSES FOR THE NEXT MONTH: \$ \_\_\_\_\_

TOTAL PROJECTED CASH PROFIT FOR THE NEXT MONTH: \$ \_\_\_\_\_

### ADDITIONAL INFORMATION

**PLEASE ATTACH ALL FINANCIAL REPORTS INCLUDING AN INCOME STATEMENT AND BALANCE SHEET WHICH YOU PREPARE INTERNALLY.**



	1-31	1st Quarter	1-31
	January	February	March
<b>Receipts</b>			
Retainer—DTC			
Net Social Security—BJD	\$ 2,420.00	\$ 2,420.00	2,420.00
Net Social Security—LYD	1,136.90	1,136.90	1,136.90
Interest and other credits	3.76	0.03	0.03
<b>Total Receipts</b>	<b>3,560.66</b>	<b>3,556.93</b>	<b>3,556.93</b>
<b>Disbursements</b>			
Mtge	-	-	-
RE tax	-	-	-
Prop Insurance			
AIG Home	2,243.00	-	-
Maintenance and CapEx	-	-	822.90
Automobile	-	4,403.79	-
Telcom	277.96	342.50	267.96
Food	997.37	667.57	1,063.35
Clothing, laundry	83.85	-	58.70
Personal service	107.58	-	116.59
Medical	567.86	463.43	80.00
Gifts	107.79	-	-
Pet	93.92	-	90.53
Lynette Waterman	1,200.00	1,200.00	1,200.00
Transportation	557.12	484.33	435.54
Entertainment	334.00	-	47.12
Charity	-	-	-
Ins-health			
United Health	589.00	589.00	589.00
Ins-car			
AIG Auto		1,017.00	-
Ins-posessions			
Bank	30.00	30.00	30.00
Legal; US Trustee	-	650.00	-
Tax	98.71	-	
<b>Total Disbursements</b>	<b>7,288.16</b>	<b>9,847.62</b>	<b>4,801.69</b>
<b>Net cash</b>	<b>\$ (3,727.50)</b>	<b>\$ (6,290.69)</b>	<b>\$ (1,244.76)</b>
<b>Cash</b>			
Opening balance	\$ 11,837.85	8,110.35	1,819.66
Net cash flow	(3,727.50)	(6,290.69)	(1,244.76)
Closing balance	\$ 8,110.35	\$ 1,819.66	\$ 574.90
Bank closing	7715.4	1,574.71	550.37
diff	394.95	244.95	24.53
Petty cash	394.95	244.95	24.53

**March 1 - March 31, 2018**  
**Citi Priority Account**

Page 1 of 6

**BENJAMIN J. DOUEK**  
**LEORA Y. DOUEK**  
**14 HILLVIEW DRIVE**  
**SCARSDALE NY 10583-7532**

**CITI PRIORITY SERVICES**  
**PO Box 769007**  
**San Antonio, Texas 78245**  
For banking call: Citi Priority Services at (888) 275-2484\*  
For speech and hearing impaired customers only: TTY 800-788-6775  
Website: [www.citibank.com](http://www.citibank.com)

Citi Priority is a service of Citibank, N.A. The following summary portion of the statement is provided for informational purposes.

<b>Value of Accounts</b>	Last Period	This Period
<b>Citibank Accounts</b>		
<b>Checking</b>		
Checking	1,332.50	408.04
<b>Citi Priority Relationship Total</b>	<b>\$1,332.50</b>	<b>\$408.04</b>

<b>Earnings Summary</b>	This Period	This Year
<b>Citibank Accounts</b>		
<b>Checking</b>		
Checking	0.03	0.18
<b>Citi Priority Relationship Total</b>	<b>\$0.03</b>	<b>\$0.18</b>

\* To ensure quality service, calls are randomly monitored and may be recorded.

### Messages From Citi Priority

Achieve your savings goals faster with Citi's "set it and forget it" Auto Save feature. Set the amount and frequency of transfers into your Savings/Money Market account and watch your savings grow. It's smart, convenient and easy. Visit [www.citibank.com](http://www.citibank.com) and click on the services tab to enroll today.

March 1 - March 31, 2018 Page 2 of 6  
BENJAMIN J. DOUEK, LEORA Y. DOUEK  
Citi Priority Account

**Citi Priority Account Package Fees & Rates Detail**

Citibank gives you the benefit of lower charges, better rates and higher transaction limits as you maintain higher balance levels. When determining your rates and monthly service fee for this statement period, and the transaction limits and fee waivers that apply during the next statement period, Citibank considers your average balance during the month of February in all your qualifying accounts that you asked us to combine. If you have a Citibank secured credit card, then Citibank will also include the balance in your Collateral Holding Account or your Certificate of Deposit that secures your Citibank credit card. These balances may be in accounts that are reported on other statements.

Monthly Service fees are waived with \$50,000 in balances from deposits, Retirement Accounts and investments.

Please refer to your Client Manual-Consumer Accounts and Marketplace Addendum booklet for details on how to determine monthly fees, charges and applicable transaction limits. To link additional eligible Citibank accounts for consideration for next month's balances please refer to the phone number on page 1.

Fees	Your Combined Balance Range \$0-\$1,499
Monthly Service Fee	\$30.00

All fees assessed for this statement period will appear as charges to your account on your next Citi Priority statement.

**Checking**

Checking  
Activity

**Interest Checking**

Date	Description	Amount Subtracted	Amount Added	Balance
03/01/18	Opening Balance			1,332.50
03/01/18	Monthly Service Fee	30.00		1,302.50
03/02/18	Debit PIN Purchase STOP & SHOP 0501 W HARRISON NYUS05154	38.97		1,263.53
03/02/18	Debit PIN Purchase CVS/PHARMACY #01 01231-EAST CHESTER NYUS05159	80.00		1,183.53
03/02/18	Mobile Purchase PIN Based G3808 TRADER JOE'S # 531 SCARSDALE NYUS91154	57.70		1,125.83
03/02/18	Cash Withdrawal 01:21p #6822 Citibank ATM 725 WHT PLNS RD, ESTCHSTR, NY	300.00		825.83
03/05/18	Debit Card Purchase 02/28 09:12p #6855 AMAZON MKTPLACE PMTS AMZN.COM/BILL WA 18061 Specialty Retail stores	9.10		816.73
03/05/18	Debit Card Purchase 02/28 05:31p #6822 91419 - 50 MAIN STREET WHITE PLAINS NY 18061 Autos (rental, service, gas)	15.00		801.73
03/05/18	Debit Card Purchase 03/01 04:33p #6822 CALI PIZZA KITC INC #1 SCARSDALE NY 18061 Restaurant/Bar	47.12		754.61
03/08/18	Check # 3148	200.00		554.61
03/09/18	Cash Withdrawal 03/09 12:18p #6822 Teller	350.00		204.61
03/09/18	Mobile Purchase Sign Based 03/07 11:35a #6822 G3808 TRADER JOE'S #531 QPS SCARSDALE NY 18067 Food & Beverages	33.48		171.13
03/12/18	Debit Card Purchase 03/09 #6855 Amazon.com AMZN.COM/BILL WA 18068 Specialty Retail stores	11.80		159.33
03/14/18	ACH Electronic Credit XXSOCIAL SECURITY FOR LEORA Y DOUEK		1,136.90	1,296.23
03/14/18	ACH Electronic Credit XXSOCIAL SECURITY FOR BENJAMIN J DOUEK		2,420.00	3,716.23
03/15/18	Debit PIN Purchase COSTCO GAS #0241 NEW ROCHELLE NYUS00155	61.54		3,654.69

**March 1 - March 31, 2018** Page 3 of 6  
BENJAMIN J. DOUEK, LEORA Y. DOUEK  
Citi Priority Account

**Checking**

Continued

Checking  
Activity  
Continued

**Interest Checking**

Date	Description	Amount Subtracted	Amount Added	Balance
03/15/18	Debit PIN Purchase COSTCO WHSE #0241 NEW ROCHELLE NYUS05153	319.04		3,335.65
03/15/18	Debit Card Purchase 03/12 06:38p #6822 GOOGLE *Google Storage 8558363987 CA 18073 Misc Mail & Phone orders	1.99		3,333.66
03/16/18	Bill Payment ABSOLUTE DRY CLEANERS 010419 CBOL	58.70		3,274.96
03/16/18	Bill Payment SIMPLY THE BEST 010420 CBOL	152.00		3,122.96
03/16/18	Bill Payment VERIZON 010422 CBOL	205.00		2,917.96
03/16/18	Cash Withdrawal 03:16p #6822 Citibank ATM 444 MAMARONECK, WHT PLNS, NY	400.00		2,517.96
03/16/18	Bill Payment AARP HEALTH CARE 010421 CBOL	589.00		1,928.96
03/19/18	Debit Card Purchase 03/16 06:13a #6855 ADTSECURITY MYADT.COM 800-238-2727 FL 18075 Misc Business Services	60.97		1,867.99
03/20/18	Debit Card Purchase 03/16 01:15p #6822 MR APPLIANCE SCARSDALE BRONX NY 18076 Contractors	450.00		1,417.99
03/22/18	Debit PIN Purchase FAIRWAY MKT PM 895 PELHPELHAM NYUS05154	161.56		1,256.43
03/22/18	Debit Card Purchase 03/19 06:03p #6822 AMAZING SAVINGS - 06 SCARSDALE NY 18080 Retail stores	39.43		1,217.00
03/22/18	Debit Card Purchase 03/20 12:52p #6822 PUNK PUPPY SALON MAMARONECK NY 18080 Misc Personal Services	80.53		1,136.47
03/23/18	Debit PIN Purchase FRESH MKT-125 SCAR SCARSDALE NYUS05054	4.92		1,131.55
03/23/18	Cash Withdrawal 03/23 11:55a #6822 Teller	400.00		731.55
03/26/18	Debit Card Purchase 03/22 04:02p #6822 NYCDOT PARKING METERS LONG IS CITY NY 18082 Autos (rental, service, gas)	0.75		730.80
03/27/18	Debit Card Purchase 03/22 04:12p #6822 CORNER CAFE RESTAURANT BRONX NY 18085 Restaurant/Bar	8.13		722.67
03/27/18	Debit Card Purchase 03/22 04:17p #6822 CORNER CAFE RESTAURANT BRONX NY 18085 Restaurant/Bar	19.50		703.17
03/27/18	Mobile Purchase Sign Based 03/23 01:25p #6822 G3808 TRADER JOE'S #531 QPS SCARSDALE NY 18083 Food & Beverages	33.96		669.21
03/27/18	Debit Card Purchase 03/23 05:00p #6822 014021 DECICCO MAR SCARSDALE NY 18083 Food & Beverages	58.33		610.88
03/29/18	Debit Card Purchase 03/26 02:14p #6822 APPLE FARM 2 WHITE PLAINS NY 18087 Food & Beverages	18.64		592.24
03/29/18	Debit Card Purchase 03/26 03:03p #6822 EASTCHESTER FISH GOURM SCARSDALE NY 18087 Food & Beverages	162.38		429.86
03/30/18	Debit Card Purchase 03/28 04:51p #6822 THE PASTRY CENTER INC SCARSDALE NY 18088 Restaurant/Bar	21.85		408.01
03/30/18	Interest for 31 days, Annual Percentage Yield Earned 0.04%		0.03	408.04
	Total Subtracted/Added	4,481.39	3,556.93	
03/31/18	Closing Balance			408.04

All transaction times and dates reflected are based on Eastern Time.

Transactions made on weekends, bank holidays or after bank business hours are not reflected in your account until the next business day.



**March 1 - March 31, 2018**  
BENJAMIN J. DOUEK, LEORA Y. DOUEK  
Citi Priority Account

Page 4 of 6

**Checking**

Continued

Overdraft  
Protection

As of	Source of Coverage	Amount
03/31/18	Checking Plus Line of Credit	\$0.00

*Safety Check transfers will not exceed \$99,999.99 per calendar month from your savings account, or per monthly period from your money market to cover overdrafts or use of uncollected funds in your checking account.*

March 1 - March 31, 2018 Page 5 of 6  
BENJAMIN J. DOUEK, LEORA Y. DOUEK  
Citi Priority Account

Please read the paragraphs below for important information on your accounts with us. Note that some of these products may not be available in all states or in all packages.

#### **CITIBANK ACCOUNTS**

The products reported on this statement have been combined onto one monthly statement at your request. Opening and closing dates of the statement period are disclosed with the opening and closing balance for each bank product in the applicable transaction activity section. The ownership and title of individual products reported here may be different from the addressee(s) on the first page.

#### **CHECKING AND SAVINGS**

##### **FDIC Insurance:**

The following bank deposits are FDIC insured up to applicable limits: Checking, Interest Checking, Insured Money Market Account, Certificates of Deposit and IRA & Keogh funds held in bank deposits.

#### **CERTIFICATES OF DEPOSIT**

Certificates of Deposit (CD) information may show dashes in certain fields if on the date of your statement your new CD was not yet funded or your existing CD renewed but is still in its grace period.

#### **IN CASE OF ERRORS**

##### **In Case of Errors or Questions about Your Electronic Fund Transfers:**

If you think your statement or record is wrong, or if you need more information about a transfer on the statement or record, telephone us or write to us at the address shown on the first page of your statement as soon as possible. We must hear from you no later than 60 days after we sent you the **first** statement on which the error or problem appeared. You are entitled to remedies for error resolution for an electronic funds transfer in accordance with the Electronic Funds Transfer Act and federal Regulation E or in accordance with laws of the state where your account is located as may be applicable. See your Client Manual for details.

**Give us the following information:** (1) your name and account number, (2) the dollar amount of the suspected error, (3) describe the error or the transfer you are unsure about and explain as clearly as you can why you believe there is an error or why you need more information. We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will recredit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

##### **The following special procedures apply to errors or questions about international wire transfers or international Citibank Global Transfers to a recipient located in a foreign country on or after October 28, 2013:**

Telephone us or write to us at the address shown in the Customer Service Information section on your statement as soon as possible. We must hear from you within 180 days of the date we indicated to you that the funds would be made available to the recipient of that transfer. At the time you contact us, we may ask for the following information: 1) your name, address and account number; 2) the name of the person receiving the funds, and if you know it, his or her telephone number and/or address; 3) the dollar amount of the transfer; 4) the reference code for the transfer; and 5) a description of the error or why you need additional information. We may also ask you to select a choice of remedy (credit to your account in an amount necessary to resolve the error or alternatively, a resend of the transfer in an amount necessary to resolve the error for those cases where bank error is found). We will determine whether an error has occurred within 90 days after you contact us. If we determine that an error has occurred, we will promptly correct that error in accordance with the error resolution procedures under the Electronic Fund Transfer Act and federal Regulation E or in accordance with the laws of the state where your account is located as may be applicable. See your Client Manual for details.

**IRAs AND KEOGH Plans** Citibank, N.A. is custodian of your Citibank IRA and trustee of your Citibank Keogh Plan.

#### **CREDIT PRODUCTS**

##### **Checking Plus Line of Credit - Fixed Rate and Variable Rate**

**Average Daily Balance:** The Average Daily Balance is computed by taking the beginning balance on your account each day, adding any new advances and adjustments as of the day they are made, and subtracting any payments as of the day received, credits as of the day issued, and any unpaid Interest Charges or other fees and charges. This gives you a daily balance. Add up all the daily balances for the statement period and divide the total by the number of days in the statement period. This gives you the Average Daily Balance. For Checking Plus (variable rate), the Daily Periodic Rate and the corresponding Annual Percentage Rate may vary.

**Interest Charge:** The Interest Charge is computed by applying the Daily Periodic Rate to the "daily balance" of your account for each day in the statement period. To get the "daily balance" we take the beginning balance each day, add any new advances and adjustments, and subtract any unpaid interest or other finance charges and any payments or credits. This gives us the daily balance. You may verify the amount of the Interest Charge by (1) multiplying each of the average daily balances by the number of days this rate was in effect, and then (2) multiplying each of the results by the applicable Daily Periodic Rate, and (3) adding these products together. (All of these numbers can be found in the table called "Interest Charge Calculation". Each average daily balance is disclosed as Balance Subject to Interest Rate. The daily periodic rate is the Annual Percentage Rate divided by 365, except in leap years when it will be divided by 366.) For Checking Plus (variable rate), the Daily Periodic Rate and the corresponding Annual Percentage Rate may vary.

Interest Charges are assessed on loans as of the day we pay your check or otherwise make funds available to you from your account. The total Interest Charges paid during the year will be shown on your statement. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

**Payment Instructions:** You can make payments online via [www.citibank.com](http://www.citibank.com), by phone - call (888) 275-2484, at any Citibank branch, Citicard Banking Center, or by mail. If paying by mail, you must include your account number and send your payment to: **Citibank, N.A., PO Box 78003, Phoenix, AZ 85062-8003**

**Other Information:** Checks drawn against a business account are not acceptable as payment for a personal loan obligation.

**Request for Credit Balance Refunds:** If your statement shows a credit balance it means your loan payments have exceeded the total amount you owe. You may request a full refund of the credit balance by writing to us at the address shown on the first page of your statement.

You are entitled to remedies for error resolution for an electronic funds transfer in accordance with the Electronic Funds Transfer Act and federal Regulation E or in accordance with laws of the state where your account is located as may be applicable. See your Client Manual for details.

##### **Billing Rights Summary - What To Do If You Think You Find A Mistake On Your Statement.**

If you think there is an error on your statement, write to us at the address shown on the first page of your statement (Attn: Checking Plus).

In your letter, give us the following information:

- **Account information:** Your name and account number.
- **Dollar amount:** The dollar amount of the suspected error.
- **Description of the Problem:** If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors *in writing*. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question. While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

#### **CREDIT CARDS**

Information about your Citibank credit card account(s) on this statement is summary information as of your last credit card statement.

You will continue to receive your regular monthly credit card statement(s).

Citibank credit cards are issued by Citibank, N.A. AAdvantage® is a registered trademark of American Airlines, Inc. Citi, Citi and Arc Design and other marks used herein are service marks of Citigroup Inc. or its affiliates, used and registered throughout the world.

Citibank is an Equal Housing Lender.



Citibank, N.A. Member FDIC

**March 1 - March 31, 2018**  
BENJAMIN J. DOUEK, LEORA Y. DOUEK  
Citi Priority Account

Page 6 of 6

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SIGNATURE BANK

565 Fifth Avenue, 12<sup>th</sup> Floor  
New York, NY 10017

Statement Period  
 From March 01, 2018  
 To March 31, 2018  
 Page 1 of 3

PRIVATE CLIENT GROUP 722  
 1C QUAKER RIDGE ROAD  
 NEW ROCHELLE, NY 10804

BENJAMIN JACK DOUEK  
 DEBTOR IN POSSESSION  
 CASE # 17 22974 RDD  
 14 HILLVIEW DR  
 SCARSDALE NY 10583

8-722

999

See Back for Important Information

Primary Account:

0

**Signature Relationship Summary****Opening Bal.****Closing Bal.**

## BANK DEPOSIT ACCOUNTS

BANKRUPTCY CHECKING

242.21

142.33

RELATIONSHIP

TOTAL

142.33



Signature

Statement Period  
From March 01, 2018  
To March 31, 2018  
Page 2 of 3

PRIVATE CLIENT GROUP 722  
1C QUAKER RIDGE ROAD  
NEW ROCHELLE, NY 10804

BENJAMIN JACK DOUEK 8-722  
DEBTOR IN POSSESSION  
CASE # 17 22974 RDD  
14 HILLVIEW DR  
SCARSDALE NY 10583 999

See Back for Important Information

Primary Account: 0

BANKRUPTCY CHECKING

Summary

Previous Balance as of March 01, 2018	242.21
6 Debits	99.88
Ending Balance as of March 31, 2018	142.33

Withdrawals and Other Debits

Mar 02	DEBIT CARD PURCHASE				12.25
	ON 03/02 AT METRO NORTH TVM TQPS	NEW YORK	NY		
Mar 12	DEBIT CARD PURCHASE				58.07
	ON 03/12 AT TRADER JOE S 531 QPS	SCARSDALE	NY		
Mar 19	DEBIT CARD PURCHASE				5.70
	ON 03/19 AT THE BLACK COW	SLEEPY HOLL	NY		
Mar 21	DEBIT CARD PURCHASE				17.16
	ON 03/21 AT BED BATH BEYOND 247	ELMSFORD	NY		
Mar 26	DEBIT CARD PURCHASE				1.00
	ON 03/26 AT VILLAGE OF SCARSDALE	SCARSDALE	NY		
Mar 26	DEBIT CARD PURCHASE				5.70
	ON 03/26 AT PATISSERIE SALZBURG OF	SCARSDALE	NY		

Daily Balances

Feb 28	242.21	Mar 19	166.19
Mar 02	229.96	Mar 21	149.03
Mar 12	171.89	Mar 26	142.33

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SIGNATURE BANK

Pg 18 of 18

Statement Period  
From March 01, 2018  
To March 31, 2018  
Page 3 of 3

PRIVATE CLIENT GROUP 722  
1C QUAKER RIDGE ROAD  
NEW ROCHELLE, NY 10804

BENJAMIN JACK DOUEK  
DEBTOR IN POSSESSION  
CASE # 17 22974 RDD  
14 HILLVIEW DR  
SCARSDALE NY 10583

8-722

999

See Back for Important Information

Primary Account:

0

*****					
*	*	Total for This	*	Total	*
*	*	Period	*	Year-to-date	*
*****					
* Total Overdraft Fees	*	.00	*	.00	*
*****					
* Total Returned Item Fees	*	.00	*	.00	*
*****					